

UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORKAmkury UrenaRECEIVED  
SDNY PRO SE OFFICE  
2022 JUN -7 PM 12:52

(In the space above enter the full name(s) of the plaintiff(s).)

-against-

CITY  
PRISONER OF NEW YORK  
WARDEN CAPUTO  
WARDEN JOHN DOS**COMPLAINT**

under the

Civil Rights Act, 42 U.S.C. § 1983  
(Prisoner Complaint)Jury Trial: ☒ Yes ☐ No  
(check one)

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

**I. Parties in this complaint:**

- A. List your name, identification number, and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff Name Amkury Urena  
ID # 241 210 2214  
Current Institution G.R.V.C  
Address 09-09 Hazen St  
Fort Elmhurst NY 11370

- B. List all defendants' names, positions, places of employment, and the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1 Name \_\_\_\_\_ Shield # \_\_\_\_\_  
Where Currently Employed \_\_\_\_\_  
Address \_\_\_\_\_

Defendant No. 2 Name CAPUTO Shield # UNKNOWN  
 Where Currently Employed AMKC  
 Address 18-18 Hazen St  
East Elmhurst NY 11370

Defendant No. 3 Name \_\_\_\_\_ Shield # \_\_\_\_\_  
 Where Currently Employed G.R.V.C  
 Address 09-09 Hazen St  
East Elmhurst NEW YORK 11370

Defendant No. 4 Name \_\_\_\_\_ Shield # \_\_\_\_\_  
 Where Currently Employed \_\_\_\_\_  
 Address \_\_\_\_\_

Defendant No. 5 Name \_\_\_\_\_ Shield # \_\_\_\_\_  
 Where Currently Employed \_\_\_\_\_  
 Address \_\_\_\_\_

## II. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. In what institution did the events giving rise to your claim(s) occur?

AMKC And G.R.V.C

B. Where in the institution did the events giving rise to your claim(s) occur?

In A.M.K.S the event arose in seg intake  
And in G.R.V.C The event arose in the transportation bus  
In front of the facility

C. What date and approximate time did the events giving rise to your claim(s) occur?

In A.M.K.S the event arose approximately from 7:00 p.m. through  
9:00 p.m. on April 28th through May 1st 2022  
And in G.R.V.C the event arose approximately 9:45 p.m. through  
10:00 AM on May 1st through May 2nd 2022

What  
happened  
to you?

Who did  
what?

Was  
anyone  
else  
involved?

Who else  
saw what  
happened?

D. Facts: On April 30th I was brought to seg intake to be transferred out the facility (from A.M.I.C. to G.R.V.C.) At approximately 7:00pm to 8:00pm in intake through the night we were not given any blankets or any other necessities And was left in seg intake past the six hour maximum time that an inmate is to be held in seg intake. At approximately 9:00 pm May 1st C.O's finally came and got us to transfer us to G.R.V.C. once we got outfront of G.R.V.C. we sat all night on the bus until approximately 10:00 AM the next morning we were all cuffed behind our backs All through the night and people on the bus suffered from seizures Asthma And other medical conditions we notified the C.O's about these conditions in which they notified the C.O's in G.R.V.C. But to no avail we were not provided with consideration of being human beings

### III. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received.

I Fell into deep depression And put in referral for mental health

### IV. Exhaustion of Administrative Remedies:

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted." Administrative remedies are also known as grievance procedures.

A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

Yes ☒ No ☐

If YES, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).

ALIC GRVC

B. Does the jail, prison or other correctional facility where your claim(s) arose have a grievance procedure?

Yes / No      Do Not Know     

C. Does the grievance procedure at the jail, prison or other correctional facility where your claim(s) arose cover some or all of your claim(s)?

Yes      No / Do Not Know     

If YES, which claim(s)?     

D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose?

Yes      No /

If NO, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

Yes / No     

E. If you did file a grievance, about the events described in this complaint, where did you file the grievance?

311

1. Which claim(s) in this complaint did you grieve? Both events described above

2. What was the result, if any? Investigation still pending

3. What steps, if any, did you take to appeal that decision? Describe all efforts to appeal to the highest level of the grievance process.     

F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here:     

I am in level 1 E.S.H and grievance ~~to~~ C.O hasn't worked in timely manner so my only option was 311

2. If you did not file a grievance but informed any officials of your claim, state who you informed,

when and how, and their response, if any: Inside of seg intake was ignored inside transportation bus no notified C.O's inside G.E.V.C Facility

G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.

Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.

V. Relief:

State what you want the Court to do for you (including the amount of monetary compensation, if any, that you are seeking and the basis for such amount).

monetary compensation of \$48,000 Dollars for approximately 24 Hours spent in intake and approximately 12 Hours spent on transportation buses

Also I would like for stricter guidelines and supervisory rules be upheld and enforced in order to stop excessive times spend in seg intakes and on transportation buses

VI. Previous lawsuits:

A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?

Yes ☒ No ☐

On  
these  
claims

- B. If your answer to A is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another sheet of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff Amaro Luna

Defendants P.N.D.C.

2. Court (if federal court, name the district; if state court, name the county) \_\_\_\_\_

Southern District

3. Docket or Index number 22-cv-1189

4. Name of Judge assigned to your case Katherine Parker

5. Approximate date of filing lawsuit 2/1/22

6. Is the case still pending? Yes ☒ No ☐

If NO, give the approximate date of disposition \_\_\_\_\_

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) \_\_\_\_\_

On  
other  
claims

- C. Have you filed other lawsuits in state or federal court otherwise relating to your imprisonment?

Yes ☐ No ☐

- D. If your answer to C is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff \_\_\_\_\_

Defendants \_\_\_\_\_

2. Court (if federal court, name the district; if state court, name the county) \_\_\_\_\_

3. Docket or Index number \_\_\_\_\_

4. Name of Judge assigned to your case \_\_\_\_\_

5. Approximate date of filing lawsuit \_\_\_\_\_

6. Is the case still pending? Yes ☐ No ☐

If NO, give the approximate date of disposition \_\_\_\_\_

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Signed this \_\_\_\_ day of May, 2022

Signature of Plaintiff

Angela Linares

Inmate Number

241 210 2214

Institution Address

09-09 Hazen St

East Elmhurst N.Y 11370

**Note:** All plaintiffs named in the caption of the complaint must date and sign the complaint and provide their inmate numbers and addresses.

I declare under penalty of perjury that on this \_\_\_\_ day of \_\_\_\_\_, 20\_\_, I am delivering this complaint to prison authorities to be mailed to the *Pro Se* Office of the United States District Court for the Southern District of New York.

Signature of Plaintiff:

Angela Linares

AMERICA UPENA 241 210 2217  
09-09 Hazen & G.R.V.C  
East Elmhurst N.Y 11370

U.S.M.P.

THE DANIEL PATRICK WORTHMAN  
UNITED STATES COURTHOUSE  
PRO SE INTAKE  
500 PEARL STREET  
NEW YORK, NEW YORK 10007-1312

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